U.S NATION STAGE WORKSHEET (D 09/55469 INTERNATIONAL APPL. U.S. APPL. NO. APPLICATION FILED BY: 20 MOS., ____ OR 30 MOS., ____ SCREENED BY INTERNATIONAL APPLICATION PAPERS IN THE APPLICATION FILE: Unternational application 409 annexes to IPER Article 19 amendments PCT/ISA/210 (Search report) Search report References Priority Document(s) No. Request Form PCT/RO/101 Other Papers filed PCT/IB/302 PCT/IB/304 WIPO PUBLICATION PUBLICATION NO. WO S PCT/IB/306 PUBLICATION DATE $\overline{\phi}$ PCT/IB/308 PCT/IB/331 PUBLICATION LANG., OTHER PCT/IB/ **NOT PUBLISHED** PCT/IPEA/409 also 416 U.S. only Requested RECEIVED FROM THE APPLICANT: (other than checked above) National application basic fee paid Preliminary Amendment(s) filed Express Processing Requested second request Information Disclosure Statement Translation of the International Application _ second submission Used the IB copy of the IA Description Assignment Forward to Assignment Branch Claims 2 Drawings 2 Substitute Specification Foreign Language in drawing **Small Entity Statement Article 19 Amendments** tvpe Oath/Declaration (date submitted_____ Amendment used in application ___ Not executed Article 34 Amendment Executed Amendment used in application Power of Attorney DNA Change of Address 1194 transaction done 35 USC Receipt of Request (PTO - 1399 Transmittal Letter) Date Acceptable oath/declaration received Date complete 35 USC 371 requirements met 102(e) Date Notice of Acceptance DO/EO 903 Notice of Missing Requirements DO/EO 905 Notice of A defective oath or declaration DO/EO 917 Notice of defective response DO/EO 916 Notice of defective translation DO/EO 913

Notification of Abandonment

DO/EO 909

DO/EO BIBLIOGRAPHIC DATA ENTRY

05 / *18* / 00 09 / 554695 RECEIPT DATE: SERIAL NUMBER: 17 / IA FILING DATE: 1 98 IA NUMBER: FCT/ JP98 / 05721 DELAY WAIVED (Y/N): FAMILY NAME: SHIRAISHI Υ DEMAND RECEIVED (Y/N): GIVEN NAME: KENICHI PRIORITY DATE: 12 / 1 US DESIGNATED ONLY (Y/N): 17 / 97 PRIORITY CLAIMED (Y/N): N NO BASIC FEE (Y/N): ATTORNEY DOCKET NUMBER: 0670-239 COUNTRY: 000000 TELEPHONE 00000000000 CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: FAX

NAME: NIXON PEABODY

STREET: 8180 GREENSBORO DRIVE

SUITE 800

CITY: MCLEAN

STATE/COUNTRY: VA ZIP: 22102

EMAIL:

APPLICATION TITLES:

RECEIVER

TAB TO LAST POSITION, PUSH SEND